

# I. APPLICATION

Please complete all sections of the NH Early  
Childhood Credential Application.

*Affix signature at the end of the application.*

# NH Early Childhood Credential Application

## I. APPLICATION INFORMATION

Please mark the box(es) next to the position(s) for which you are applying. Credential level is dependent on qualifications and will be determined by the Credentialing Specialist.

- |                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/>            | NH Family Child Care  |
| <input checked="" type="checkbox"/> | NH Early Childhood Teacher  |
| <input type="checkbox"/>            | NH Early Childhood Master Teacher                                       |
| <input type="checkbox"/>            | NH Early Childhood Administrator  |
| <input type="checkbox"/>            | NH Early Childhood Master Professional: Workshop Trainer endorsement    |
| <input type="checkbox"/>            | NH Early Childhood Master Professional: Faculty endorsement             |
| <input type="checkbox"/>            | NH Early Childhood Master Professional: Individual Mentor endorsement   |
| <input type="checkbox"/>            | NH Early Childhood Master Professional: Program Consultant endorsement  |
| <input type="checkbox"/>            | NH Early Childhood Master Professional: Allied Professional endorsement |
| <input checked="" type="checkbox"/> | NH Early Childhood Infant and Toddler Endorsement                       |

- ☒ New Application (\$25.00)
 ☐ New Position (\$25.00)
 ☐ Change of Level (\$10.00)
 ☐ Expired Credential (\$25.00)
 ☐ Application for Renewal (\$10.00)

\*Each additional **Master Professional** and **Infant and Toddler** endorsement is \$5.00 (when applying for more than one), please indicate the # of additional endorsements: 1

Please make checks payable to: **Treasurer State of NH**

## II. PERSONAL INFORMATION

Name Jane Doe Smith

(Please print your name exactly as you want it to appear on your credential)

Other name/s in which information may be received-maiden, etc.

Home Address: 123 Any Road

City/State/Zip: Any town, NH, 00000

E-mail: childcare123abc@child.com

Primary Telephone: (603) 555-5555

Work Telephone: (603) 555-5555

Last 4 digits of Soc. Sec. #

If applying between October 1<sup>st</sup>, 2012 and March 1<sup>st</sup>, 2013, please check one of the following:

- ☒ YES, I would like to receive my credential in person at the Annual Celebration for EC and AS Professionals on Tuesday, April 16<sup>th</sup>, 2013.
 ☐ NO, I will not be attending the Annual Celebration, please mail my credential.

### FOR OFFICE USE ONLY:

Date Application Received: \_\_\_\_\_ Date Payment Received: \_\_\_\_\_ Check # \_\_\_\_\_

Check from: \_\_\_\_\_ Check amt: \_\_\_\_\_ Amount applied to app: \_\_\_\_\_

Credential Awarded: \_\_\_\_\_ Date: \_\_\_\_\_ Expires: \_\_\_\_\_

<b>III. EDUCATIONAL HISTORY</b>			
	<b>Institution</b>	<b>City/State</b>	<b>Date of Completion</b>
<b>High School Diploma:</b>	High School	Anytown, NH	2005
<b>GED:</b>			
<b>Colleges/Universities</b>	<b>City/State</b>	<b>Date of Attendance</b>	<b>Degree(s) Awarded</b>
Community College	Anytown, NH	2006 - 2009	A.S. ECE
University	Anytown, NH	2009 - 2012	B.S. ECE
<b>Professional Credentials</b>	<b>City/State</b>	<b>Date Issued</b>	<b>Last Date of Renewal</b>
ECT level 4			
<b>IV. EMPLOYMENT INFORMATION*</b>			
<b>Name of Program/Employer:</b> <i>Child Care World 123</i>			
<b>Address:</b> <i>55 Play Street</i>			
<b>City/State/Zip:</b> <i>Anything, NH 00000</i>			
<b>Phone number:</b> <i>603-603-6036</i>		<b>Program License #:</b> <i>CCCB-XXXX</i>	
<b>Full time or Part Time hours:</b> <i>37.5 Hours</i>			
<b>Starting Date of Your Current Position:</b> <i>2007</i>			

<b>V. WORK EXPERIENCE*</b>
<b>*Please attach your <i>updated</i> resume, including current position, and please enclose a letter from current and previous employer(s) verifying the following: employment dates, position held, hours per week, and ages of children in your care. You only need to document employment as required per credential work experience requirements.</b>

**PLEASE NOTE:** All supporting credential documentation must be received within 60 days of your initial credential application submission. Incomplete applications will be archived after 60 days. Should you re-apply for a credential, you will be required to resubmit all documentation, and credential fees.

## VI. EDUCATION AND SPECIALIZED COURSEWORK

- A copy of your high school diploma or GED may be required for some lattice levels \*.
- All credit and degree requirements must include a minimum of 3 credits focused on Child Growth and Development.
- College course\* transcripts must arrive in a sealed envelope from the college registrar's office.

*\*Please refer to lattices and "approved coursework" for reference*

## VII. ONGOING PROFESSIONAL TRAINING

<i>Please attach copies of training certificates that include dates, length of training, and content in the Core Knowledge Areas as listed below. The present or host org./agency must sign certificates.</i>			
	<b>Title of Training(s)</b>	<b>Date</b>	<b>Hours or Credits</b>
<b>Developing as a Professional</b>	<i>Professionally Grown</i>	<i>10-10-12</i>	<i>2</i>
	<i>Creating a professional portfolio</i>	<i>7-10-12</i>	<i>2</i>
<b>Building Family and Community Relationship</b>	<i>Building family partnerships</i>	<i>1-1-12</i>	<i>2</i>
	<i>Strengthening Families</i>	<i>7-25-12</i>	<i>2</i>
<b>Teaching and Learning</b>	<i>Creating infant environments</i>	<i>8-10-12</i>	<i>2</i>
<b>Promoting Child Growth and Development</b>	<i>Self-Study: Physical Fitness article</i>	<i>7-7-12</i>	<i>1</i>
	<i>Self-Study: Executive Function article</i>	<i>3-3-12</i>	<i>1</i>
<b>Observing, Documenting, and Assessing</b>	<i>Creating documentation panels in ECE settings (3 Part Series)</i>	<i>5-5-12</i>	<i>3</i>
		<i>6-5-12</i>	<i>3</i>
		<i>6-29-12</i>	<i>3</i>

## VIII. PROFESSIONAL ACTIVITY UNITS (PAU'S) – ATTACH DOCUMENTATION

All levels, with the exception of Family Child Care Level 1, and the NH Early Childhood Teacher level 1, require documentation of PAU's. Please refer to the appropriate lattice for the number of PAU's required. Please contact the Credentialing Specialist with any questions at 603-271-4686.

*The information presented in this packet is complete and accurate to the best of my knowledge.*

Signature: \_\_\_\_\_

Date: 12-10-12

## II. Resume

Please insert an updated resume.



## **Jane Doe Smith**

Any Street, Any town, NH, 03300  
(603) 555-5555(H) (603) 555-5551 (C)

### **Objective**

To work with children and families in a professional, nurturing, and developmentally appropriate environment, in which each child and family has their own opportunity for discovery and success.

### **Education**

University of New Hampshire, Durham, NH September 2006 – May 2008  
Degree: B.S., Family Studies

New Hampshire Technical Institute, Concord, NH, September 2003 – May 2006  
Degree: A.S. in Early Childhood Education

Plymouth State University, Plymouth, NH, September 2000 – May 2003  
Focus: Social Work / Early Childhood Education

### **Professional Experience**

06/10-Present, Intern, State of NH, DCYF, Child Development Bureau, Concord, NH  
Monitor license-exempt provider billing for improper payments  
Early childhood and afterschool professional development system credentialing rule  
Infant/toddler equipment distribution report by county

03/08-12/10 Lead Teacher, Child Development Center, Any town, NH  
Actively engage children in developmentally appropriate activities  
Implement positive child behavior guidance strategies  
Responsible for documentation, developmental progress notes and portfolios, and implementation of curriculum

06/07-02/08, Lead Teacher, Child Care Center, Any town, NH  
Prepared curriculum for children ages 4 to 6 years old  
Maintained the overall facilitation and appearance of the classroom

09/06 – 05/07 Classroom Assistant, Learning Center, Any town, NH  
Assisted lead teacher in daily routines  
Interacted with infants/toddlers through after school aged children

09/05 – 05/06 Classroom Aide, Child Development and Family Center, Any town, NH  
Assisted lead teachers in daily routines  
Interacted with infants/toddlers through kindergarten

### **Certifications/Training/Workshops**

Cardiopulmonary Resuscitation (CPR) certified / First Aid certified valid through December 2014  
Water Safety and Supervision Training, valid through 2014  
NHAEYC 2008-2011 Spring Conferences, New Hampshire  
NAEYC National Conference, Anaheim, California, November 2010  
\*For a complete list see section labeled Awards, Credentials, and Conferences in professional portfolio

### **Professional Memberships/Organizations**

Member, National Association for the Education of Young Children  
Member, Early Learning NH  
Member of the NH Infant / Toddler Task Force, CDB

### III. Work Experience

Please submit a letter from your current and previous employer(s).

Include these components the letter:

- ✓ Employment Dates
- ✓ Position held
- ✓ Hours worked per week
- ✓ Ages of children in your care

(You only need to document verification of employment as required per credential work experience requirements.)

*All letters must have a signature and contact information.*



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION FOR CHILDREN, YOUTH & FAMILIES

Nicholas A. Toumpas  
Commissioner

Maggie Bishop  
Director

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-4451 1-800-852-8345 Ext. 4451  
FAX: 603-271-4729 TDD Access: 1-800-735-2964

August 2, 2011

Dear Credentialing Specialist:

This letter is to confirm the employment of *(insert name)*. *(Insert name)* was hired on January 3, 2009 in the position of *(Lead, Associate, Assistant, Director, Etc)*. S/he currently works *(insert hours)* per week.

Please let me know if you have any questions.

Sincerely,

***This must be signed!***

Name  
Title  
Email address  
Phone Contact

**\* The wording in the above paragraph may be changed to reflect a position in which you are no longer employed. For example, “*(insert name)* was hired on *(date)* and resigned / terminated /etc employment on *(date)*.”**

**\*It is necessary for this letter to be on letterhead from your place of employment.**



## IV. Workshop / Trainings

Please attach copies of training certificates that include dates, length of training, and training content in the Core Knowledge Areas as listed.

*Certificates must be signed by the present or host organization / agency.*



# *Certificate of Attendance*

*Presented to*

*Jane Doe Smith*

**For participating in the credential workshop, Professionally Grown**

This professional development training included information regarding the NH Early Childhood Professional Development System

**Core Knowledge Area:** Developing as a Professional  
2 hours of professional development

**Date: August 23<sup>rd</sup>, 2011**

**Presenter's Signature**

**Presenter's Name, B.S., Early Childhood Master Professional**

**Presenter's affiliation / organization**

## V. Professional Activity Units

Please include documentation of PAU's. You may select activities from the list of PA's included with Credential materials.

Examples include:

- ✓ Professional Development Plan
- ✓ Local or State conference certificate
- ✓ Membership card / documentation
- ✓ Presenter certificates
- ✓ Letter documenting any in-service trainings provided
- ✓ Letter / agenda for attendance at approved meetings

*Documentation must be signed by the appropriate individuals when necessary. If you have any questions regarding PAU's please contact the credentialing specialist at 271-4684.*



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603-271-4451 1-800-852-3345 Ext. 4451  
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Nicholas A. Toumpas  
Commissioner

Maggie Bishop  
Director

September 25, 2011

Credentialing Specialist  
DHHS / DCYF / Child Development Bureau  
129 Pleasant Street  
Concord, NH 03301

Dear Credentialing Specialist:

This letter is to confirm that Jane Doe Smith presented an in-service training to her colleagues on August 27, 2011. The presentation, Easing Transition for Toddlers, began at 6:00 PM and ended at 7:30 PM. Jane created an agenda, handouts, and power point. The presentation covered appropriate expectations for transitions with toddlers, 18 to 36 months. Jane incorporated a Q & A session where she also discussed barriers, frustrations, and solutions to these some times difficult transitions.

Sincerely,

THIS MUST BE SIGNED

Director, ABC Down the Road  
12 Any Street  
Any town, NH 03301  
603-555-5555  
ABCDownRoad@gmail.com

Encls.



**STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION FOR CHILDREN, YOUTH & FAMILIES**

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September 25, 2011

Credentialing Specialist  
DHHS / DCYF / Child Development Bureau  
129 Pleasant Street  
Concord, NH 03301

Dear Credentialing Specialist:

This letter is to confirm that Jane Doe Smith attended the Spark NH Early Childhood Advisory Council meeting on September 2, 2011 from 9:00 AM – 12:00PM. She attended this meeting with me, the director of ABC Down the Road. Please see the attached agenda for details regarding this meeting. Jane also had the facilitator of the meeting sign the agenda.

Sincerely,

THIS MUST BE SIGNED

Director, ABC Down the Road  
12 Any Street  
Any town, NH 03301  
603-555-5555  
ABCDownRoad@gmail.com

Encls.



## Professional Activities Documentation Form

Please complete this form for professional activities that are not listed in the on the PA Matrix.  
Please attach any additional appropriate documentation (copy of certificate, brochure, photograph, etc)  
*The credentialing specialist will review your request and, if approved, assign units.*

<b>Title of Activity:</b>	
<b>Location:</b>	
<b>Date:</b>	<b>Time:</b>

1. Please mark the Core Knowledge Area(s) that this activity addressed

<input type="checkbox"/>	Developing as a Professional
<input type="checkbox"/>	Building Family and Community Relations
<input type="checkbox"/>	Teaching and Learning
<input type="checkbox"/>	Promoting Child Growth and Development
<input type="checkbox"/>	Observing, Documenting, and Assessing

2. Provide a brief explanation of the activity in which you participated:

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3. List 2 ways that this activity provided opportunity for your own professional growth in the early childhood field:

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4. List up to 3 ways in which your involvement in this activity either gave back to the greater early childhood community and/or improved the quality of care you provide for children and families. (Please note that activities that serve only marketing purposes for programs or organizations are not considered professional activities for the purpose of awarding PAU's):

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Signature of verification\*: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

*\*A supervisor, employer, or other leader in the field can complete signatures of verification*

## Professional Development Plan (Part I)

A critical component of professional development is self-awareness and reflection, followed by action planning. Professional development plans begin with reflection and the move forward with goal setting, so that you can further your growth in the field.

Please use the following reflective questions as a tool to stimulate your thinking. These ideas and thoughts can be used as a foundation for creating your professional development plan. One of the important steps in achieving professional growth through your plan is by staying committed. Frequently review this plan with your employer, director, or supervisor (at least every 4-6 months). Be sure to create an intentional follow up plan.

### What are your professional goals?

*I want to be a well rounded, respected early childhood professional. I hope to continuously expand my knowledge and skills within this field and act a mentor and coach to others. One day I hope to open my own early care and education center so that I can provide high quality early childhood programs and services to the community.*

*Short-term goals include: attending more workshops that focus on the infant and toddler stage and then sharing that with my infant and toddler colleagues, obtaining my professional Early Childhood credential, and become a member of NAEYC.*

*Long-term goals include: opening up a high quality early care and education program, completing my master's and then Ph.D. in early childhood education, advocating for higher early childhood professional wages, and (on-going goal) advocating for the needs of children and families*

### What do you want to learn more about in the field of early care and education or afterschool?

*I am really interested in learning more about infant and toddler development. I have worked with infants and toddlers for 3 years and would like to be able to gather information to create some type of workshop or workshops so that others in the field can learn as well. I understand that there is a specific set of skills that one needs in order to be competent and provide adequate care to this age group.*

*I would like to learn more about the NH Early Childhood Professional Development System. I have not yet attended a workshop, but I frequently hear of my colleagues becoming "credentialed". I want to become credentialed!*

### Are there any aspects of your work that challenge you? What would you like to be able to do better?

*One aspect of my work that is challenging is dealing with challenging parents. There are times when parents can come off as aggressive (they may be upset that their child was pushed by another child or that we allowed their child sleep 30 minutes longer and they didn't agree). I find it challenging to calm parents down, especially when I may not agree with their particular stance on an issue. I would like to learn how to better communicate with them and not take it so personally. I also would like to add short articles to my resource library so that when a parent is looking for more information, I have it readily available. I need to enroll in a workshop about dealing with parents.*

*Challenging behaviors are another area of my work that is challenging to me. I completed a course in challenging behaviors, but I think it is time to attend a workshop or take another course as a refresher.*

### What are your current strengths?

*I feel like I am very professional and I take my job seriously. I have found my passion in life and really enjoy the job that I do. I want to improve quality for children and families as well as strengthen and motivate teachers to become more involved and educated on the important of this field. I feel like I bring a fresh light to the field and hopefully can expand it to others.*

*I work hard everyday and I try my best to be the most helpful that I can to individuals seeking my assistance. I take pride in the work that I do and I feel like I am good at creating things and bringing my perspective to the table for others to hear.*

# Professional Development Plan

(Part II)

Name: Jane Doe Smith

Title/Position: Toddler Lead Teacher

Date of hire: March 2010

Hours per week: 37.5 +

Age group: 18 – 36 months

## Education Completed:

- ☐ GED  
☐ High School Diploma  
☒ Associate Degree  
☒ Baccalaureate Degree  
☐ Master's Degree  
☐ Doctorate

(Major: Early Childhood Education)

(Major: Family Studies: Child Advocacy and Family Policy)

(Concentration:       )

(Dissertation:       )

## ACTION PLAN FOR PROFESSIONAL GROWTH AND DEVELOPMENT

Reviewed By: \_\_\_\_\_

<u>Goal</u> What do you want to learn more about, do better, and/or achieve? (Core Knowledge Area)	<u>Activity</u> What activity will you engage in to achieve your goal (for example: enroll in a class, complete a workshop, review literature, plan a specific event or activity, etc)?	<u>Resources Needed</u> "	<u>Progress Assessment</u>	<u>Date completed</u>	<u>Evidence of Accomplishment</u>
<u>CKA</u> Developing as a Professional & Observing, Documenting and Assessing <u>GOAL</u> Create a training titled, "Documentation in Infant and Toddler Settings"	I will create an outline of the training and gather appropriate resources and materials that I have used in my practice (pictures of young children with permissions, sample documentation panels, portfolio pages, etc). I will then develop a training that incorporates best practice, research, and activities that help learners to understand the important of documenting infant and toddlers learning.	Time / workshop materials "	To be completed within 3 months, create a timeline and check back in w/ myself		I will have a comprehensive infant and toddler training that I present to child care programs
<u>CKA</u> Developing as a Professional – <u>GOAL</u> I want to learn more about and become credentialed	I will enroll in the next workshop "Professionally Grown". I will begin to gather my documentation so that I can work on my Early Childhood Credential application.	Time / workshop registration	2-4 months to complete		I will have a credential on the wall at work!
<u>CKA</u> Promoting Child Growth & Development – <u>GOAL</u> I want to become more familiar with Child Care Licensing Regulations	I will attend the Child Care Licensing Unit online orientation (1/2 hour) and then I will download the CCLU Rules from the DHHS website so that I can begin reading.	Computer, time, copy of the CCLU Rules	Read 10 pages per night or every other night until finished (complete within 3 months)		I will have a copy of the rules and be more familiar with the expectations.

Reviewed By: Jane Doe Smith's supervisor

☐ Initial review

Date:

☐ Semi-annual review

Date:

☐ Quarterly review

Date:

☒ Yearly- review

Date: March 2012

## VI. Transcripts

Please request an **OFFICIAL** copy of your transcripts to be sent directly to:

Credentialing Specialist  
DCYF/Child Development Bureau  
129 Pleasant Street  
Concord, NH 03301